that predictor variables for schizophrenic patients can be identified so that the choice of hospital treatment will be a more rational decision.

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Encounter Groups

ENCOUNTER GROUPS may include labels such as "training groups" and "sensitivity groups." The background of the leader may vary from extensive training to nothing but previous group participation. Generally participants in these groups consider themselves normal, and hope for a "growth experience." The group methods used are potentially very powerful, in both beneficial and destructive ways.

Yalom and his co-workers made extensive studies of a group of university students assigned to encounter groups with leaders of differing backgrounds and styles.

"Casualties," defined as enduring significant negative outcomes which were caused by participation in the group, occurred in 16 subjects, a figure approaching 10 percent of the 170 who completed the course. A casualty was most likely to occur in persons of low self-esteem and unrealistically high expectations from the group experience. The highest risk leadership style was characterized by high stimulus input, charisma, intrusiveness, and focus on individual rather than group or interpersonal dynamics.

These group experiences may be gratifying, stimulating and even insight producing, but the potential for psychological damage must be carefully evaluated in each situation.

JOHN S. PECK, M.D.

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Ultradian Rhythms and Behavior

SLEEP, as electrophysiologically measured, shows a striking temporal organization. There is an intrasleep cycle characterized by rhythmic alternation between rapid eye movement sleep and nonrapid eye movement sleep, with the length of the total cycle on the order of 100 minutes. Such fast frequency biological rhythms are designated "ultradian," in contrast to slower rhythms on the order of 24 hours which are termed "circadian."

Recent evidence suggests that an ultradian rhythm is also present during waking. Such rhythms have been detected in waking oral activity, performance on a signal detection task, and a number of psychological and physiological variables in subjects under sensory deprivation conditions. It may be that the prominent intrasleep cycle is only a reflection of a more general ultradian rhythm (the "basic rest-activity cycle") which continues throughout the 24 hours and which is of broad behavioral significance. Investigations into the temporal organization of behavior are of increasing interest, but the clinical relevance remains as yet unclear.

GORDON G. GLOBUS, M.D.

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Current Approaches to the Study of Suicide Prevention

Present emphasis in studies of suicide prevention is on the improvement of predictive scales, the development of more effective intervention techniques and evaluation of the impact of suicide prevention programs.

Scales which quantify suicide risk are evolving in the direction of sets of variables applicable to a basic subtype. For example, Lettieri has developed a ten-item scale for women over 40 and an eight-item scale for women under 40, with only one item common to both scales. Chances of one to two-year survival as regards suicide are determined, assuming the person is a caller to a suicide prevention center. Scales for various subgroups derived from different populations are being developed by other investigators.

New intervention techniques involve radiodispatched crisis teams, emphasis on face-to-face counseling as an extension of traditional 24-hour telephone referral services, and integration of suicide prevention into the broader field of crisis intervention. A set of curricula for training in suicidology, for various professional and non-professional groups, has been developed by the NIMH Center for Studies in Suicide Prevention.

Current efforts to evaluate the effectiveness of suicide prevention programs are aimed primarily at the problem of nomenclature, which has made the observed suicide rate such an inadequate guideline.

JEROME A. MOTTO, M.D.

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